

**SAMPLE Memoranda of Agreement  
(Implementing an EBPM at a Clinic Site)**

This Memorandum of Agreement (MOA) is between Sample County Health Department, hereinafter referred to as “SCHD,” and Neighborhood Health Clinic, hereinafter referred to as “NHC.” This MOA is effective upon [start date] and shall remain in effect until [end date]. The MOA may be updated by written agreement of both parties, and may be terminated by either party with a 30-day written notice.

SCHD is a sub-awardee of the California Personal Responsibility and Education Program (CA PREP). SCHD is responsible for providing evidence-based program models (EBPMs) proven to change behavior, delay sexual activity, increase condom or contraceptive use among sexually-active youth, and/or reduce pregnancy to high-risk adolescents within Sample County. NHC is a reproductive health clinic within Sample County. The purpose of this MOA is to ensure all parties understand and agree on how the EBPM will be implemented (e.g., number of sessions, participant demographics, length of sessions, contents of sessions).

SCHD and NHC have a common objective: to reduce the pregnancy and birth rates of high-risk youth populations within Sample Neighborhood by implementing effective program models that provide teens with the knowledge, understanding, and behavioral skills necessary to make responsible decisions regarding risky sexual behaviors.

In view of the common objective, SCHD and NHC agree on the following:

The representatives responsible for upholding and fulfilling the terms of this MOA are:

<u>Sample County Health Department</u>	<u>Neighborhood Health Clinic</u>
Jane Doe, Health Educator Telephone: (XXX) XXX-XXXX E-mail: Xxxxx@xxxx.com	John Smith, Director of Health Education Telephone: (XXX) XXX-XXXX E-mail: Xxxxx@xxxx.com

Communication: The representatives will communicate weekly or more frequently, if necessary, via e-mail, telephone, and face to face meetings.

Participants to be Served: 48 or more sexually active African American NHC clients, ages 14 to 18.

EBPM to be Implemented: SiHLE 2<sup>nd</sup> Edition, 2011. The goal of SiHLE is to *reduce sexual risk behaviors, reduce STIs and pregnancy, and to enhance skill, and mediators of HIV preventive behaviors.*

SCHD Obligations:

SCHD staff will implement the EBPM with fidelity by adhering to the following:

1. Provide NHC with at least one full-day site visit to discuss the project; learn more about NHC's mission, vision, services, and clients; and provide information on the EBPM approaches to teen pregnancy prevention.
2. Have clients complete a baseline survey on their recent sexual behavior. Have clients respond to questions about their attitudes and intentions regarding risky sexual behavior and their knowledge of STI/HIV.
3. Teach correct and consistent condom use, the importance of partner involvement in safer sex, assertive communication skills, and healthy relationships.
4. Teach four (4) sessions (3 modules per session) three (3) hours each session.
5. Conduct EBPM sessions with up to 12 African American girls ages 14 to 18 who have engaged in vaginal intercourse within the previous six months.
6. Provide all EBPM facilitator materials including: a facilitator's manual, photocopy masters of posters, the participant handbook, additional handouts, the Jeopardy game and sessions evaluations, evaluation instruments, Prevention Minimum Evaluation Data Set (PMEDS), a generic questionnaire that can be adapted to suit most prevention programs, Local Evaluator Consultant Network Directory, condoms, name tags, etc.
7. Implement and adhere to the core components for the SiHLE! EBPM.
8. Survey participants on their attitudes and intentions regarding risky sexual behavior, and on their knowledge of STI/HIV and pregnancy prevention immediately after the intervention, and again at three (3) months, six (6) months, nine (9) months, and 12 months after the intervention.
9. Protect the confidentiality of any data collected from youth in outcome evaluations or any other source.
10. Conduct and participate in program/performance evaluation to monitor the progress or success of intervention activities at three (3), six (6), nine (9) and 12 month intervals after the intervention.

NHC Obligations:

NHC agrees to cooperate with SCHD's implementation and evaluation of the evidenced-based teen pregnancy prevention program for its youth clientele. Specifically, NHC agrees to:

1. Meet with SCHD staff at least one full-day and on an on-going basis to discuss the project; learn more about the EBPM approaches to teen pregnancy prevention. Provide SCHD staff with information on the NHC's mission, vision, services, and clients.
2. As appropriate, provide assistance to and support of SCHD's EBPM planning, implementation, evaluation, documentation, and sustainability.

3. Participate in program evaluation (both process and outcome evaluation) by agreeing to evaluate the implementation of the prevention program/evidenced-based program model, and by collecting evaluation measures from program participants before and after the program is delivered.
4. Protect the confidentiality of any data collected from youth in outcome evaluations or any other source. Ensure any data shared with SCHD for this project is completely confidential, stripped of all identifiers, and provided in aggregate form.
5. Provide space and staff, as needed, to implement the EBPM.
6. Cover meeting logistics.

We, the undersigned, have read and hereby agree to the terms within this MOA.

\_\_\_\_\_  
SCHD Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title of Signing Authority (print or type)

\_\_\_\_\_  
NHC Director of Health Education

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title of Signing Authority (print or type)